

<b>REQUEST FOR WITHDRAWAL AS ATTORNEY OR AGENT AND CHANGE OF CORRESPONDENCE ADDRESS</b>	Application Number	10/668,433
	Filing Date	09/22/2003
	First Named Inventor	Daniel
	Art Unit	3739 Conf. No. 2354
	Examiner Name	Peffley, M.
	Attorney Docket Number	37167-8042.US01

**To: Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450**

Please withdraw me as attorney or agent for the above identified patent application, and

- ☐ all the attorneys/agents of record.  
☐ the attorneys/agents (with registration numbers) listed on the attached paper(s), or  
☒ the attorneys/agents associated with Customer Number

NOTE: This box can only be checked when the power of attorney of record in the application is to all the practitioners associated with a customer number.

The reasons for this request are:

In an email dated 05/15/2008, the client has requested that this file be transferred to the law firm identified below

### CORRESPONDENCE ADDRESS

1. ☐ The correspondence address is NOT affected by this withdrawal.  
2. ☒ Change the correspondence address and direct all future correspondence to:

☐ The address associated with Customer Number:

**OR**

☒ Firm or Individual Name **ABELMAN, FRAYNE & SCHWAB**

Address	666 Third Avenue				
City	New York	State	NY	Zip	10017-5621
Country	US				
Telephone	212 949-9022		Email	hahn@lawabel.com	
Signature	/Peter J. Dehlinger/				
Name	Peter J. Dehlinger		Registration No.	28,006	
Date	May 20, 2008		Telephone No.	650 838-4300	

NOTE: Withdrawal is effective when approved rather than when received. Unless there are at least 30 days between approval of withdrawal and the expiration date of a time period for response or possible extension period, the request to withdraw is normally disapproved.